

3. Number of pages attached

### ANNUAL STATEMENT

#### FOR THE YEAR ENDING DECEMBER 31, 2011

OF THE CONDITION AND AFFAIRS OF THE

American Dental Providers of Arkansas, Inc. NAIC Group Code 0119 NAIC Company Code \_\_ 58-2302163 0119 Employer's ID Number (Current Period) (Prior Period) , State of Domicile or Port of Entry \_ Organized under the Laws of Arkansas Arkansas Country of Domicile **United States** Licensed as business type: Life, Accident & Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ] Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [X] Is HMO, Federally Qualified? Yes [ X ] No [ ] Other [ ] Incorporated/Organized 01/29/1997 03/20/1997 Commenced Business c/oCSC300SpringBldg,Ste900,300S.SpringSt Statutory Home Office Little Rock, AR 72201 (City, State and Zip Code) Main Administrative Office 100 Mansell Court East, Suite 400 (Street and Number) 770-998-8936 Roswell, GA 30076 (City, State and Zip Code) (Area Code) (Telephone Number) 100 Mansell Court East, Suite 400 Mail Address Rosell, GA 30076 (Street and Number or P.O. Box) (City, State and Zip Code) Primary Location of Books and Records 100 Mansell Court East. Suite 400 (Street and Number) Roswell, GA 30076 770-998-8936 (City, State and Zip Code) (Area Code) (Telephone Number) (Extension) Internet Web Site Address www.compbenefits.com Statutory Statement Contact Murray Gipe 502-580-1548 (Name) (Area Code) (Telephone Number) (Extension) mgipe@humana.com 502-580-2099 (E-Mail Address) (Fax Number) **OFFICERS** Name Title Name Title VP & Corporate Secretary Gerald Lawrence Ganoni Joan Olliges Lenahan President Sr. VP, CFO & Treasurer James Harry Bloem Jonathan Albert Canine # Appointed Actuary OTHER OFFICERS George Grant Bauernfeind Vice President Elizabeth Diane Bierbower **COO-Specialty Benefits** Roy Goldman Ph.D Vice President VP & Chief Actuary John Gregory Catron John Edward Lumpkins Charles Frederic Lambert, III Vice President Vice President Heidi Suzanne Margulis Sr. Vice President Mark Matthew Matzke VP-Small Bus. Risk Mgmt Gilbert Alan Stewart Vice President William Joseph Tait Vice President Joseph Christopher Ventura Assistant Secretary Tod James Zacharias Vice President **DIRECTORS OR TRUSTEES** Michael Benedict McCallister James Harry Bloem # James Elmer Murray State of Kentucky County of ... Jefferson The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and ital tills statement, together with related exhibits, schedules and explanations therein contained, ameked of referred to, is a full and the statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions* and *Accounting Practices* and *Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement. Joan Olliges Lenahan James Harry Bloem Gerald Lawrence Ganoni Sr. VP, CFO & Treasurer **VP & Corporate Secretary** President Yes [ X ] No [ ] a. Is this an original filing? Subscribed and sworn to before me this b. If no: day of February, 2012 1. State the amendment number 2. Date filed

Julia Basham Notary Public January 10, 2013

# **EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

11	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
0199999 Total individuals						
Group subscribers:						
Group subscribers: Federal Region	3,597	1,694	4,381	1,254	1,254	9,672
0000007 Occupants and analysis of the state o	2 507	1,694	4,381	1,254	1 054	0.670
0299997 Group subscriber subtotal	3,597 329	58			1,254	9,672 
0299998 Premiums due and unpaid not individually listed	329		240	422	422	10.000
0299999 Total group	3,926	1,752	4,621	1,676	1,676	10,299
0399999 Premiums due and unpaid from Medicare entities		<del> </del>				l
0499999 Premiums due and unpaid from Medicaid entities						
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	3,926	1,752	4,621	1,676	1,676	10,299

# **EXHIBIT 3 - HEALTH CARE RECEIVABLES**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
		<u> </u>		1		1
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	NON					
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		1	1	1	1	1
		1	T	T	1	T
0799999 Gross health care receivables	(	) 0	0	^	0	^
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# EXHIBIT 4 – CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

	Aging Analysis of Unpai	d Claims				
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)	,	,		,	,	
0199999 Individually listed claims unpaid	0	0	0	0	0	0
0299999 Aggregate accounts not individually listed-uncovered	6	0	0	0	1 22	7 299
0499999 Subtotals	247		10	7	23	306
0599999 Unreported claims and other claim reserves 0699999 Total amounts withheld						6,580
0799999 Total claims unpaid						6,886
0899999 Accrued medical incentive pool and bonus amounts						0

# EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	Adm	itted
						7	8
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
				ļ			
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				ļ			
				ļ			
0199999 Individually listed receivables	0	0	0	J0	ļ0	0	0
0299999 Receivables not individually listed							
0399999 Total gross amounts receivable	0	0	0	0	0	0	0

# **EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Humana Inc	Reimbursement from expenditures made	19,855	19,855	
	directly by Humana Inc. for the benefit			
	of American Dental Providers of AR Inc			
	or for services provided by Humana Inc			
	for the company. The direct expenditures			
	include payments for medical related			
	items, trade payables, & payroll related			
	items. The services provided include &			
	are not limited to actuarial			
	underwriting, biling enrollements, claim			
	administration, customer services,			
	utilization management, prior			
	authorization, quality management,			
	accounting, financial analysis, legal,			
	tax, budgeting, data processing, &			
	marketing			
0199999 Individually listed payables		19.855	19.855	0
0299999 Payables not individually listed				
0399999 Total gross payables		19,855	19,855	0

### **EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS**

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
Medical groups	0	0.0	826	100.0		<b></b> .0
2. Intermediaries	0	0.0		0.0		
3. All other providers		0.0		0.0		<b></b> _0
4. Total capitation payments		0.0	826	100.0	<u></u> 0	<u> </u> 0
Other Payments:						
5. Fee-for-service	0	0.0	xxx	XXX		0
Contractual fee payments	71,791	100.0	lxxx	XXX		L71,791
7. Bonus/withhold arrangements - fee-for-service		0.0	lxxx	XXX		
Bonus/withhold arrangements - contractual fee payments		0.0	Lxxx	XXX		
9. Non-contingent salaries		0.0	xxx	XXX		L0
10. Aggregate cost arrangements		0.0	lxxx	XXX		]
11. All other payments	0	0.0	XXX	XXX		
12. Total other payments	71,791	100.0	XXX	XXX	0	71,791
13. Total (Line 4 plus Line 12)	71,791	100 %	XXX	XXX	0	71,791

### **EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

	EARIBIT 7 - PART 2 - SUMMART OF TRANSACTIONS		VIAILDIWILIE	3	
1	2	3	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized
NAIC Code	Name of Intermediary	Capitation Paid	Capitation	Total Adjusted Capital	Control Level RBC
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			<u> </u>		<u> </u>
9999999 Totals			XXX	XXX	XXX

# **EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED**

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
Administrative furniture and equipment						
Medical furniture, equipment and fixtures      Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	0	0	0	0	0	0



# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

American Dental Providers of Arkansas, Inc. REPORT FOR: 1. CORPORATION

							·	(LOCATION)	·	
IAIC Group Code 0119 BUSINESS IN THE STATE OF	Arkansas	0	h	DURING THE YEAR	2011			NA	IC Company Code	11559
	1	Compre (Hospital &	nensive & Medical)	4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	805	0		0	0	805	0	0	0	
2 First Quarter	814	0		0	0	814	0	0	0	
3 Second Quarter		0		0	0	820	0	0	0	
4. Third Quarter	811	0		0	0	811	0	0	0	
5. Current Year	826	0		0	0	826	0	0	0	
6 Current Year Member Months	9,785	0		0	0	9,785	0	0	0	
Total Member Ambulatory Encounters for Year:										
7. Physician	0									
8. Non-Physician	0									
9. Total	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b)	199,036					199,036		0		
13. Life Premiums Direct										
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	199,005					199,005				
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	71,791					71,791				
18. Amount Incurred for Provision of Health Care Services	71,895					71,895				

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$......0

# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

American Dental Providers of Arkansas, Inc.

2. Consolidated

								(LOCATION)		
NAIC Group Code 0119 BUSINESS IN THE STATE OF	Consolidated			DURING THE YEAR	2011			NA	IC Company Code	11559
	1	Compre (Hospital &	& Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year		0	0	0	0	805	0	0	0	
2 First Quarter		0	0	0	0	814	0	0	0	
3 Second Quarter		0	0	0	0	820	0	0	0	
4. Third Quarter		0	0	0	0	811	0	0	0	
5. Current Year	826	0	0	0	0	826	0	0	0	
6 Current Year Member Months	9,785	0	0	0	0	9,785	0	0	0	
Total Member Ambulatory Encounters for Year:										ĺ
7. Physician		0	0	0	0	0	0	0	0	
8. Non-Physician	0	0	0	0	0	0	0	0	0	
9. Total	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	
12. Health Premiums Written (b)		0	0	0	0	199,036	0	0	0	
13. Life Premiums Direct		0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written		0	0	0	0	0	0	0	0	
15. Health Premiums Earned	199,005	0	0	0	0	199,005	0	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	71,791	0	0	0	0	71,791	0	0	0	
18. Amount Incurred for Provision of Health Care Services	71,895	0	0	0	0	71,895	0	0	0	

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

Schedule S - Part 1 - Section 2

**NONE** 

Schedule S - Part 2

**NONE** 

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

**NONE** 

Schedule S - Part 5

**NONE** 

# **SCHEDULE S - PART 6**

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

		1	2	3
		As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	519,643		519,643
2.	Accident and health premiums due and unpaid (Line 15)	10,299		10,299
3.	Amounts recoverable from reinsurers (Line 16.1)	0		0
4.	Net credit for ceded reinsurance	xxx	0	0
5.	All other admitted assets (Balance)	1,115		1,115
6.	Total assets (Line 28)	531,057	0	531,057
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)	6,886	0	6,886
8.	Accrued medical incentive pool and bonus payments (Line 2)	0		0
9.	Premiums received in advance (Line 8)	1,373		1,373
10.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19)	0		0
11.	Reinsurance in unauthorized companies (Line 20)	0		0
12.	All other liabilities (Balance)	. 83,254		83,254
13.	Total liabilities (Line 24)	91,513	0	91,513
14.	Total capital and surplus (Line 33)	439,544	XXX	439,544
15.	Total liabilities, capital and surplus (Line 34)	531,057	0	531,057
	NET CREDIT FOR CEDED REINSURANCE			
16.	Claims unpaid	0		
17.	Accrued medical incentive pool.	0		
18.	Premiums received in advance	0		
19.	Reinsurance recoverable on paid losses	0		
20.	Other ceded reinsurance recoverables	0		
21.	Total ceded reinsurance recoverables	0		
22.	Premiums receivable	0		
23.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
24.	Unauthorized reinsurance	0		
25.	Other ceded reinsurance payables/offsets	0		
26.	Total ceded reinsurance payables/offsets	. 0		
27.	Total net credit for ceded reinsurance	0		

# SCHEDULE T – PART 2 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

				Direct Bus	siness Only		
		1 Life	2	3 Disability Income	4 Long-Term Care	5	6
States, Etc.		(Group and Individual)	Annuities (Group and Individual)	(Group and Individual)	(Ğroup and Individual)	Deposit-Type Contracts	Totals
1. Alabama	AL						
2. Alaska	AK						
3. Arizona	AZ						
4. Arkansas	AR						
5. California	CA						
6. Colorado	CO						
7. Connecticut	CT						
8. Delaware	DE						
9. District of Columbia	-						
10. Florida							
11. Georgia							
12. Hawaii	HI						
13. Idaho	ID						
14. Illinois	IL						
15. Indiana	JN						
16. lowa	IA						
17. Kansas	KS						
18. Kentucky	KY						
19. Louisiana							
20. Maine	ME						
21. Maryland							
22. Massachusetts	MA						
23. Michigan	MI						
24. Minnesota	MN						
25. Mississippi	MS		_				
26. Missouri							
27. Montana	MT			·····			
28. Nebraska	NE						
29. Nevada							
30. New Hampshire							
31. New Jersey	NJ						
32. New Mexico	NM						
33. New York	NY						
34. North Carolina	NC						
35. North Dakota	ND						
36. Ohio	OH						
37. Oklahoma							
38. Oregon	OR						
39. Pennsylvania							
40. Rhode Island	RI		ļ				<b>.</b>
41. South Carolina	SC		ļ				<u> </u>
42. South Dakota	SD						
	TN						
44. Texas	TX						
45. Utah			<b>†</b>				
46. Vermont			†				
	VT						
47. Virginia			·		·		-
48. Washington							
49. West Virginia							
50. Wisconsin	WI						<b>.</b>
51. Wyoming							
52. American Samoa							
53. Guam							
54. Puerto Rico							
					l		
55. U.S. Virgin Islands						l	<b> </b>
56. Northern Mariana Islands							-
57. Canada					ļ	ļ	
58. Aggregate Other Alien	TO						
		0	0	0	0	0	1

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
						Name of					Type of Control			
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal	-	Traded (U.S. or	Parent Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number		CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
00119	Humana Inc.	00000	39-1514846		-		CareNetwork, Inc.	WI	UDP	Humana Inc.	Ownership	100.0	Humana Inc	† 1
00119	Humana Inc.	95885	61-1013183				Humana Health Plan, Inc.	KY	I A	Humana Inc.	Ownership.		Humana Inc	
00119	Humana Inc.	73288	39 - 1263473				Humana Insurance Company	W	IA	CareNetwork, Inc.	Ownership		Humana Inc	
00110	I I I I I I I I I I I I I I I I I I I	7 0200	100 1200+10				Humana Employers Health Plan of			Tour GNOT WOTK, THO.	0 #1101 3111 p	1	Tidilidita Tilo	
00119	Humana Inc.	95519	58-2209549				GA. Inc.	GA	IA	Humana Insurance Company.	Ownership.	100.0	Humana inc	
00119		900 19					Humana Insurance Company of			Triuliaria rrisurarice company	Owner strip	100.0	Tiuliana Tilo	
00119	Humana Inc.	60219	61-1311685				Kentucky	KY_	I A	Humana Insurance Company	Ownership	100.0	Humana Inc.	
00119	Humana Inc.	54739	52-1157181				The Dental Concern, Inc.	KY	IAIA	HumanaDental, Inc.	Ownership		Humana Inc.	
								N1						
00119	Humana Inc	52028	. 36 - 3654697				The Dental Concern, Ltd.	IL	. IA	HumanaDental, Inc	Ownership	100.0	Humana Inc	
00440	l., .	05040	00 4505000				Humana Wisc. Health Org. Ins.		1.4		0 1:	400.0	l., ,	
00119	Humana Inc.	95342	. 39 - 1525003				Corp.	WI	IA	.CareNetwork, Inc	Ownership		Humana Inc	
00119	Humana Inc.	00000	61 - 1223418				Health Value Management, Inc	DE	NIA	Humana Inc.	Ownership	100.0	Humana Inc	
							Humana Health Ins. Co. of							
00119	Humana Inc.	69671	61 - 1041514				Florida, Inc	FL	IA	Humana Inc.	Ownership	100.0	Humana Inc	
							Humana Health Plan of Ohio,							
00119	Humana Inc	00000	. 31-1154200				Inc	0H	I A	.Humana Inc	Ownership	100.0	Humana Inc	
							Humana Health Plan of Texas,				,			
00119	Humana Inc.	95024	61-0994632				Inc.	TX	IA	Humana Inc.	Ownership	100.0	Humana Inc	
00119	Humana Inc.	95270	61-1103898				Humana Medical Plan, Inc.	FL	I A.	Humana Inc.	Ownership	100.0	Humana Inc.	
							Humana Military Healthcare				- · · · · · · · · · · · · · · · · · · ·			
00119	Humana Inc.	00000	61-1241225				Services, Inc.	DE	NIA.	Humana Inc.	Ownership	100.0	Humana Inc.	
00119	Humana Inc.	00000	61 - 1232669				Managed Care Indemnity, Inc.	VT	I A	Humana Inc.	Ownership		Humana Inc.	
00119	Humana Inc.	00000	61 - 1343508				Humana MarketPOINT, Inc	KY	NIA	Humana Inc.	Ownership		Humana Inc	
00119	Humana Inc.	00000	61-1239538	1			Humco, Inc	КҮ	NIA	Humana Health Plan, Inc	Ownership		Humana Inc	
00113	I illimaria i i il C	00000	. 01-120000				Humana Health Plans of Puerto				Owner Sirrp	100.0	Tiulilaria Tilo	
00119	Humana Inc.	00000	66-0406896				Rico. Inc.	PR	IA	.Humana Inc	Ownership	100.0	Humana Inc	
00119	nullialia IIIC	00000	. 00-0400090				Humana Insurance of Puerto	FN	IA		Owner Strip	100.0	Tulliana mic	
00119	Humana Inc.	84603	66-0291866				Rico. Inc.	PR	IA	Humana Inc.	Ownership.	100.0	Humana Inc.	
00119	Humana Inc.	00000	61-1364005					DE		Humana Inc.	Ownership		Humana Inc.	
			. 01-1304003				HumanaDental, Inc.		UDP					
00119	Humana Inc.	70580	. 39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc	Ownership		Humana Inc	
00119	Humana Inc	00000	. 61-1237697				Emphesys, Inc	DE	UDP	Humana Inc	Ownership		Humana Inc	
00119	Humana Inc	88595	. 31-0935772				Emphesys Insurance Company	TX	IA	Emphesys, Inc	Ownership		Humana Inc	
00119	Humana Inc	00000	61-0647538		.0000049071 NYS	SE	Humana Inc	DE	UDP		Ownership		Humana Inc	
00119	Humana Inc	00000	61 - 1316926				Humana Pharmacy, Inc	DE	NIA	Humana Inc	Ownership		Humana Inc	
00119	Humana Inc	00000	61 - 1383567				HUM-e-FL, Inc	FL	NIA	Humana Inc	Ownership	100.0	Humana Inc	
		1					Competitive Health Analytics,			L		1	L	
00119	Humana Inc	00000	42-1575099				Inc	IL	NIA	Humana Inc	Ownership	100.0	Humana Inc	
							Humana Health Plan Interests,				·			
00119	Humana Inc	00000	71-0732385				Inc	LA	NIA	.Humana Insurance Company	Ownership	100.0	Humana Inc	
							Humana Health Benefit Plan of			Humana Health Plan Interests,	'			i i
00119	Humana Inc.	95642	72 - 1279235				LA. Inc.	LA	IA	Inc.	Ownership	100.0	Humana Inc	l
							Humana Innovation Enterprises,				'			
00119	Humana Inc.	00000	61 - 1343791				Inc.	DE	NIA	Humana Inc.	Ownership	100 0	Humana Inc.	
00119	Humana Inc.	00000	20-1724127				Preservation on Main, Inc.	KY	NIA	Humana Inc.	Ownership		Humana Inc.	
00110	1110		1 - 11	1			CAC-Florida Medical Centers.			1110	5 51 0111P	1		
00119	Humana Inc.	00000	26-0010657				IIIC	FL	NIA	.Humana Inc	Ownership	100.0	Humana Inc	
00119	Humana Inc.	95092	59 - 2598550				CarePlus Health Plans, Inc	FL	IA	CPHP Holdings, Inc	Ownership		Humana Inc	
00119	Humana Inc.	00000	75-2043865				Corphealth, Inc.	TX	NIA	Humana Inc.	Ownership		Humana Inc	
00119	Humana Inc.		30-0117876				CPHP Holdings, Inc.	FL	UDP	Humana Inc	Ownership	100.0	Humana Inc	
00119	Humana   Hit		.100-011/0/0				portir Horumys, Hib		. UDF	.j.iuiiidiid 1116	0411619111h	100.0	Triulliaria IIIC	

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						Name of					Type of Control			1
						Securities					(Ownership,			1
						Exchange if					Board,	If Control is	Ultimate	1
_		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	1
Group		Company	ID.	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	1 .
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	
00440	House and the	00000	04 4470040				American Tax Credit Corp GA	DE	OTIL	0 5	Other		Homes Land	1 1
00119	Humana Inc	. 00000	61 - 1478012				Fund III,LLC	DE	OTH	See Footnote 1	Other		Humana Inc	11
00440	House Land	00000	FO 074F044				A11'4 1 1 0	DE	OTIL	0 5	Board of		Homes Land	1
00119	Humana Inc.	. 00000	. 59-3715944				Availity, L.L.C.	DE	0TH	See Footnote 2	Directors	400.0	Humana Inc	2
00119	Humana Inc.	. 00000	. 61 - 1279716				CHA Service Company	KY	IA	Humana Health Plan, Inc	Ownership		Humana Inc	
00119	Humana Inc.	95158	61-1279717				CHA HMO, Inc	KY	UDP	CHA Service Company	Ownership	100.0	Humana Inc	1
00119	Humana Inc.	. 00000	20-2620891				Green Ribbon Health, L.L.C	DE	0TH	See Footnote 3	Other		Humana Inc	13
00440	l., .						Healthcare E-Commerce	50	0.711		0.11		l	1 ]
00119	Humana Inc	. 00000					Initiative, Inc	PR	OTH	See Footnote 4	Other		Humana Inc	4
00119	Humana Inc	. 00000	. 20-4835394				.Humana Active Outlook, Inc	KY	NIA	Humana Inc	Ownership	100.0	Humana Inc	
00440	l., .						Humana Govt. Network Services,	25		Humana Military Healthcare		400.0	l	1
00119	Humana Inc.	. 00000	20-1717441				Inc	DE	NIA	Services, Inc.	Ownership	100.0	Humana Inc	1
00119	Humana Inc.	. 00000	39-1769093				Independent Care Health Plan	WI	OTH	See Footnote 5	Other		Humana Inc	5
00119	Humana Inc.	. 00000	. 20-3355580				Sensei, Inc.	DE	0TH	See Footnote 6	Other		Humana Inc	16
	l., .		<b>-</b>				515-526W MainSt						l	1
00119	Humana Inc	. 00000	20-5309363				CondoCouncilofCo-Owners	КҮ	NIA	Preservation on Main, Inc	Ownership		Humana Inc	1
00119	Humana Inc	00000	. 20-8236655				Corphealth Provider Link, Inc	TX	NIA	Corphealth, Inc	Ownership		Humana Inc	
00119	Humana Inc	. 00000	. 33-0916248				DefenseWeb Technologies, Inc	DE	NIA	Humana Inc	Ownership	100.0	Humana Inc	
							Humana Insurance Company of New							i l
00119	Humana Inc	. 12634	20-2888723				York	NY	IA	Humana Inc	Ownership	100.0	Humana Inc	
							Humana MarketPOINT of Puerto							i l
00119	Humana Inc.	. 00000	20-3364857				Rico, Inc.	PR	NIA	Humana Inc	Ownership	100.0	Humana Inc	
							Humana Medical Plan of Utah,							1
00119	Humana Inc	. 12908	20-8411422				. Inc	UT	IA	Humana Inc	Ownership	100.0	Humana Inc	
							Humana Veterans Healthcare			Humana Military Healthcare				i I
00119	Humana Inc	00000	. 20-8418853				Services, Inc	DE	NIA	Services, Inc	Ownership	100.0	Humana Inc	
							American Dental Plan of N. C.,							1 1
00119	Humana Inc	. 95107	. 56 - 1796975				Inc	NC	IA	Humana Dental Company	Ownership	100.0	Humana Inc	1
							American Dental Providers of							i I
00119	Humana Inc	. 11559	58-2302163				Ark., Inc	AR	IA	Humana Dental Company	Ownership		Humana Inc	
00119	Humana Inc	. 52015	. 59-2531815				CompBenefits Company	FL	IA	Humana Dental Company	Ownership		Humana Inc	1
00119	Humana Inc		04-3185995				. CompBenefits Corporation	DE	UDP	Humana Inc	Ownership		Humana Inc	
00119	Humana Inc	. 00000	. 59 - 1843760				.Humana Dental Company	FL	UDP	CompBenefits Corporation	Ownership	100.0	Humana Inc	
										Dental Care Plus Management				1
00119	Humana Inc	. 11228	. 36-3686002				CompBenefits Dental, Inc	IL	IA	Corporation	Ownership		Humana Inc	[
00119	Humana Inc.	00000	58-2228851 74-2552026	.			CompBenefits Direct, Inc	DE	IA	Humana Dental Company	Ownership		Humana Inc	[
00119	Humana Inc	60984	74-2552026				CompBenefits Insurance Company	TX	IA	Humana Dental Company	Ownership		Humana Inc	[
00119	Humana Inc	. 12250	. 63 - 1063101				CompBenefits of Alabama, Inc	AL	IA	HumanaCares, Inc	Ownership	100.0	Humana Inc	1
00119	Humana Inc	. 00000	. 58-2198538				CompBenefits of Georgia, Inc	GA	IA	HumanaCares, Inc	Ownership	100.0	Humana Inc	1
							Dental Care Plus Management							1 1
00119	Humana Inc		. 36-3512545				Corp.	IL	UDP	Humana Dental Company	Ownership	100.0	Humana Inc	
00119	Humana Inc.	. 95161	76-0039628				DentiCare, Inc	TX	IA	Humana Dental Company	Ownership	100.0	Humana Inc	1
				1			Kanawha HealthCare Solutions,			1				1 1
00119	Humana Inc.	. 00000	62-1245230	.			Inc.	TN	IA	Kanawha Insurance Company	Ownership		Humana Inc	1
00119	Humana Inc	. 65110	57 - 0380426	.			Kanawha Insurance Company	SC	IA	KMG America Corporation	Ownership	100.0	Humana Inc	1
00119	Humana Inc	. 00000	. 20 - 1377270				KMG America Corporation	VA	UDP	Humana Inc	Ownership		Humana Inc	1
00119	Humana Inc		65-0274594 74-2352809	.]			.HumanaCares, Inc	FL	NIA	Humana Dental Company	Ownership		Humana Inc	[]
00119	Humana Inc.		74-2352809				Texas Dental Plans, Inc	TX	IA	Humana Dental Company	Ownership		Humana Inc	
00119	Humana Inc.	. 95754	162-1579044				Cariten Health Plan Inc	TN	IA	PHP Companies, Inc.	Ownership		Humana Inc	
00119	Humana Inc.	82740	62-0729865				Cariten Insurance Company	TN	IA	PHP Companies, Inc	Ownership	100.0	Humana Inc	1

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Part							Name of					Type of Control			
Part															
Product   Prod							Exchange if						If Control is	Ultimate	
Product   Prod			NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Control   Cont	Group				Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary		Directly Controlled by				
Name	Code	Group Name		Number	RSSD	CIK					(Name of Entity/Person)		Percentage		*
Marine   Proc.   1975		Humana Inc.	10126				,	Humana AdvantageCare Plan. Inc.	FL						
Marco   Marc			1					Humana Benefit Plan of							
Mines   Fig.   Company	00119	Humana Inc.	60052	37 - 1326199					IL	IA	Humana Inc.	Ownership	100.0	Humana Inc.	
Annexe   Frc.			1												
Marie No.	00119	Humana Inc.	00000	26-3473328					CA	IA	Humana Inc.	Ownership	100.0	Humana Inc.	
Marie No.												Ownership			
March   Dec   1974   62-149662   Ten.   Inc.   Dec   MA   PR Corporation   Dec   Dec   March   Dec   Dec   MA   Processing   Dec			1					Preferred Hith Partnership of							
Number   10   Country	00119	Humana Inc.	95749	62 - 1546662					TN	IA	PHP Companies. Inc.	Ownership	100.0	Humana Inc.	
Marie   C			1								, , , , , , , , , , , , , , , , , , , ,				
Number   N	00119	Humana Inc	00000	62-1250945					TN	NIA	PHP Companies Inc	Ownership	100.0	Humana Inc	
Human Inc.				26-4522426							Health Value Management Inc				
Marie   Nation   Na	00110	Trainaria Trio.	1	1022120							Humana Military Healthcare	. oor om p		Transaria Trio	
Oncestration   December   Decem	00119	Humana Inc	00000	27 - 1323221					DF	NIA		Ownership	100.0	Humana Inc	
Name															
Number   N	00110	Tridiliana 1110.	100000					Humana Medical Plan of			Tidilidia Tilo.	. o #1101 5111 p		Tidilidild Tilo	
Numaria Medical Plan of Plan	00110	Humana Inc	00000	27_3001/110					мт	NΙΔ	Humana Inc	Ownershin	100.0	Humana Inc	
Human Inc.   00000   27-460631   Pennsylvania Inc.   PA   NIA   Human Inc.   Ownership   100 0 Humana Inc.	00110	Trainaria Tric	100000					Humana Medical Plan of		N1/\	Tidiliana Tilo	. O #1101 3111 p			
Number   Color   Col	00110	Humana Inc	00000	27_4660531					DΛ	NIA	Humana Inc	Ownerchin	100.0	Humana Inc	
Humana Inc.   00000   86-1967975   LLC   OH   NIA   Corphealth Inc.   Ownership   20.0   Humana Inc.   7   7   7   7   7   7   7   7   7	00113	Triuliaria Tric	100000	. 27 -400000 1				Humminghird Coaching Systems	//			. Owner strip	100.0		
Humana Inc.   00000   27-453574   Humana Inc.   00000   27-453547   Humana Inc.   00000   27-453547   Humana Inc.   00000   27-453547   Humana Inc.   00000   45-2254346   Humana Inc.   00000   45-2254346   Humana Inc.   00000   45-2254346   Humana Inc.   00000   45-3253344   Humana Inc.   00000   45-3253344   Humana Inc.   00000   45-316348   Humana Inc.   00000   Human	00110	Humana Inc	00000	96 1050705					∩⊔	NIIA	Corphoalth Inc	Ownerchin	100.0	Humana Inc	
Humana Inc.   00000   27-4535747   Humana Inc.   0000   27-4535747   Humana Inc.   0000   47-525346   Humana Inc.   0000   45-2025436   Humana Inc.   0000   75-204040   Humana Inc.   0000   77-204040   Humana Inc.   0000   77-204366   Humana Inc.				. 100-1030/93							Con Footnoto 7		25.0	Humana Inc	7
Mumbra   Inc.				27 4525747											7
Murana Inc.   00000   45-3023344   Hursol   Inc.   DE   NIA   Hursana Inc.   Ownership   100 o Hursana Inc.   00000   45-3023344   Hursol   Inc.   DE   NIA   Hursana Inc.   Ownership   100 o Hursana Inc.   00000   45-307384   Hursana Inc.   00000   45-3077894   Hursana Inc.   00000   77-064040   M.D. Care   Inc.   DE   NIA   Hursana Inc.   Ownership   100 o Hursana Inc.   000000   77-064040   Hursana Inc.   00000   77-064040   Hursana Inc.   000000   77-064040   Hu				1 -4000141				Humana Dharmany Calutions Inc							/
Marical Control   Humana Inc.				40-2204040				Indinaria Pharmacy Sofutions, Inc.							
Motor   Humana Inc.				40-3023344											
Mulman   Inc.			100000	140-3110340											
Multiplication   Mult			100000	20 - 198 1339											
American Current Care of Arizona, P.A.   AR   NIA   See Footnote 17   Directors   Humana Inc.   17			100000	17 -0340040				IANVITA, INC.					100.0	Humana Inc	
October   Directors   Direct	00119	numana mc.	1 00000	43-3///094					DE	NIA	numana mc		100.0	nullaria iiic	
Marrican Current Care of Arkansas, P.A.   American Current Care of Arkansas, P.A.   American Current Care of CA, A Med.   COP.   CA NIA See Footnote 17.   Board of Directors Board Order Board Directors Board Directors Bo	00110	Humana Jas	00000	00 0000074					4.7	ALL A	Can Fasturets 17			Illumana Ina	47
Outling	00119	nulliaria iric	100000	20-0002074				ATTZONA, P.A.	AZ	NIA	See Foothote 17			пишана ніс	1/
American Current Care of CA, A Med.   Corp.   CA	00440	House Lee	00000	00 0004407					4.0	ALLA	0 5			Illiania de la c	47
Number   N	00119	Humana Inc	. 00000	20-3224187					AK	NIA	See Foothote 17			Humana Inc	17
American Current Care of DE, P.A.   DE   NIA   See Footnote 17   Directors   Humana Inc.   17   Marerican Current Care of MA, P.C.   MI   NIA   See Footnote 17   Directors   Humana Inc.   17   Directors   Humana Inc	00440	House Lee	00000	00 0050000					0.4	ALLA	0 5			Illiania de la c	47
Name	00119	Humana Inc	. 00000	26-0656668						NIA	See Foothote 17			Humana Inc	17
American Current Care of HI, Prof. Corp.   HI   NIA   See Footnote 17.   Board of Directors   Humana Inc.   17	00440	House Lee	00000	00 0040007				American current care of DE,	DE	ALLA	0 5			Illiania de la c	47
Note	00119	Humana Inc						American Consent Consent Ul	DE	NIA	see rootnote 1/			Humana Inc	[1/]
American Current Care of MA, P.C.   MA	00440	House Lee	00000	00.0000004						ALLA	0 5			Illiania de la c	47
Note	00119	Humana Inc.	100000	26-2089004				Prof. Corp.	HI	. NIA	See Foothote 17			Humana Inc	17
American Current Care of   Michigan, P.C.   MI   NIA   See Footnote 17.   Directors   Humana Inc.   17	00440	l., .	00000	00 0404047				American Current Care of MA,							4-7
00119         Humana Inc.         00000         20-5997415         Michigan, P.C.         MI         NIA         See Footnote 17.         Directors.         Humana Inc.         17           00119         Humana Inc.         00000         27-1160021         Missouri, P.C.         MO         NIA         See Footnote 17.         Directors.         Humana Inc.         17           00119         Humana Inc.         00000         26-1809492         NE         NIA         See Footnote 17.         Directors.         Humana Inc.         17           00119         Humana Inc.         00000         26-1809492         NE         NIA         See Footnote 17.         Directors.         Humana Inc.         17           00119         Humana Inc.         00000         26-1961910.         Jersey PA.         NJ         NIA         See Footnote 17.         Directors.         Humana Inc.         17           00119         Humana Inc.         00000         26-1961910.         Jersey PA.         NJ         NIA         See Footnote 17.         Directors.         Humana Inc.         17           American Current Care of NC.         American Current Care of NC.         NJ         NIA         See Footnote 17.         Directors.         Humana Inc.         17	00119	Humana Inc	00000	26-2104617				[P.C	MA	. NIA	See Footnote 17			Humana Inc	11/
American Current Care of Missouri, P.C. MO. NIA. See Footnote 17. Directors. Humana Inc. 17  American Current Care of Nebraska, P.C. NE. NIA. See Footnote 17. Directors. Humana Inc. 17  American Current Care of New NJ. NIA. See Footnote 17. Directors. Humana Inc. 17  American Current Care of New NJ. NIA. See Footnote 17. Directors. Humana Inc. 17  American Current Care of New NJ. NIA. See Footnote 17. Directors. Humana Inc. 17  American Current Care of New NJ. NIA. See Footnote 17. Directors. Humana Inc. 17  American Current Care of NC.	22112	l., .		00 5007445										l	
00119         Humana Inc.         00000         27-1160021         Missouri, P.C.         MO         NIA         See Footnote 17         Directors         Humana Inc.         17           00119         Humana Inc.         00000         26-1809492         NE         NIA         See Footnote 17         Directors         Humana Inc.         17           00119         Humana Inc.         00000         26-1961910         Jersey PA         NJ         NIA         See Footnote 17         Directors         Humana Inc.         17           American Current Care of New Jersey PA         NJ         NIA         See Footnote 17         Directors         Humana Inc.         17           American Current Care of New Jersey PA         NJ         NIA         See Footnote 17         Directors         Humana Inc.         17	00119	Humana Inc.	100000	20-599/415					M1	. NIA	See Footnote 1/			Humana Inc	17
American Current Care of Nebraska, P.C.  NE NIA See Footnote 17.  NE NIA SEE FOOTNOTE SEE SEE SEE SEE SEE SEE SEE SEE SEE S	1	l			1					l	l			l	L. 1
00119. Humana Inc. 00000. 26-1809492. Nebraska, P.C. NE NIA. See Footnote 17. Directors. Humana Inc. 17 American Current Care of New Jersey PA. NJ NIA. See Footnote 17. Directors. Humana Inc. 17 American Current Care of NC. Board of	00119	Humana Inc.	100000	27 - 1160021					MO	. NIA	See Footnote 1/			Humana Inc	17
American Current Care of New 00000 26-1961910 Board of Jersey PA NIA See Footnote 17 Directors Humana Inc. 17  American Current Care of NC.	1			[	1			American Current Care of			<u> </u>				1
00119. Humana Inc. 00000. 26-1961910. Jersey PA. NJ. NIA. See Footnote 17. Directors. Humana Inc. 17 American Current Care of NC.	00119	Humana Inc	100000	.   26 <b>-</b> 1809492					NE	. NIA	See Footnote 17			Humana Inc	17
American Current Care of NC.	1			[	1				Ī .	1	<u> </u>				
American Current Care of NC,	00119	Humana Inc	100000	26 - 1961910					NJ	. NIA	See Footnote 17			Humana Inc	17
00119   Humana Inc.   00000   26-2018322   Humana Inc.   NC   NIA   See Footnote 17   Directors   Humana Inc.   17	1			[	1			American Current Care of NC,	Ī .	1	<u> </u>				
	00119	Humana Inc.	00000	26-2018322				P.C	NC	NIA	See Footnote 17	Directors		Humana Inc	17

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						Name of					Type of Control			
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
_		NAIC	Federal			Publicly	Name of	l	Relationship to		Management,	Ownership	Controlling	
Group		Company	ID.	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
00440	Illument Lan	00000	26-3239475				American Current Care of Ohio, P.A., Co	OH	NII A	Con Footmate 47	Board of		Illumana Ina	17
00119	Humana Inc	00000	20-3239475				P.A., CO	OH	NIA	See Footnote 17	Directors		Humana Inc	17
00119	Humana Inc.	00000	20-5805198				American Current Care, P.A	ТХ	NIA	See Footnote 17	Board of Directors		Humana Inc.	17
00119		00000	. 20-3003190				Allierican current care, F.A	I A	NTA	Concentra Integrated	DITECTORS		Tullialia IIIC	17
00119	Humana Inc.	00000	26-2681597				Auto Injury Solutions, Inc.	DE	NIA	Services, Inc.	Ownership	100 0	Humana Inc.	
00119	Humana Inc.	00000	01-0510161				CM Occupational Health, L.L.C.	ME	NIA	See Footnote 8.	Joint Venture	100.0	Humana Inc.	8
00119	Humana Inc.	00000	20-0114482				Concentra Akron. L.L.C.	DE	NIA	See Footnote 9	Joint Venture		Humana Inc.	9
00119	Humana Inc.	00000	62-1691148				Concentra Arkansas, L.L.C	DE	NIA	See Footnote 10	Joint Venture		Humana Inc	10
00110	Transaria 1110		102 100 1140				Concontra Arkansas, E.E.O			Concentra Operating	001111 101111110		Tidilidild Tilo	10
00119	Humana Inc.	00000	75-2510547				Concentra Health Services, Inc	NV	NIA	Corporation	Ownership	100 0	Humana Inc	
00119	Humana Inc.	00000	26-4823524				Concentra Inc.	DE	NIA	Humana Inc.	Ownership		Humana Inc.	
00119	Humana Inc.	00000	04-3363415				Concentra Operating Corporation	DE	NIA	Concentra Inc.	Ownership		Humana Inc.	
							Concentra Integrated Services,			National Healthcare				
00119	Humana Inc	00000	04-2658593				Inc	MA	NIA	Resources, Inc.	Ownership	100.0	Humana Inc	l
										National Healthcare				
00119	Humana Inc	00000	76-0546504				Concentra Laboratory, L.L.C	DE	NIA	Resources, Inc	Ownership	100.0	Humana Inc	
							Concentra Occ Health Research			Concentra Health Services.				
00119	Humana Inc.	00000	75-2857879				Institute	TX	NIA	Inc.	Ownership	100.0	Humana Inc	
							Concentra Occ Healthcare				'			1
00119	Humana Inc.	00000	23-2901126				Harrisburg, L.P.	PA	NIA	See Footnote 11	Joint Venture		Humana Inc	11
										Concentra Health Services,				
00119	Humana Inc	00000	75-2678146				Concentra Solutions, Inc	DE	NIA	. Inc	Ownership	100.0	Humana Inc	
							Concentra South Carolina,							
00119	Humana Inc	00000	75-2784513				L.L.C	DE	NIA	See Footnote 12	Joint Venture		Humana Inc	12
00119	Humana Inc	00000	75-2821236				Concentra St. Louis, L.L.C.	DE	NIA	See Footnote 13	Joint Venture		Humana Inc	13
							Concentra Worksite of Arizona,				Board of		l	
00119	Humana Inc.	00000	27 - 1743694				IP.A	AZ	NIA	See Footnote 17	Directors		Humana Inc	1/
00440	l., .	00000	07.0005070				Concentra Worksite of CA, A	0.4		0 5 1 1 17	Board of		l., ,	47
00119	Humana Inc.	00000	27 - 2935870				Med. Corp.	CA	NIA	See Footnote 17	Directors		Humana Inc	11/
00119	Humana Inc	00000	22-3675361				Concentra-UPMC, L.L.C	DE	NIA	See Footnote 14	Joint Venture		Humana Inc	14
00110	Humana Inc.	00000	86-0751979				Managad Proportion Program	AZ	NIA	Concentra Health Services,	Ownorch:	100.0	Humana Inc	
00119	пишана нис		. 00-0/319/9				Managed Prescription Program National Healthcare Resources,	AZ		. 1116	Ownership Board of	100.0	numana mc	
00119	Humana Inc.	00000	11-3273542				Inc.	DE	NIA	See Footnote 17	Directors		Humana Inc	17
00118	Tiulialia IIIC		. 11 - 321 3342				Occspecialists Corp., A Medical	∪⊏	INTA		Board of		Tiuliana IIIC	17
00119	Humana Inc.	00000	94-3418907				Corp.	CA	NIA	See Footnote 17	Directors		Humana Inc.	17
00110	Trainaria 1110						Occupational Health Centers of	Ur			Board of		Tidilidia Tilo	
00119	Humana Inc	00000	75-2688160				AR. P.A.	TX	NIA	See Footnote 17	Directors		Humana Inc	17
00110	Traineria 1110		2000100				Occ Health Centers of CA, A			1	Board of		110	''
00119	Humana Inc.		77 - 0469725				Med. Corp.	CA	NIA	See Footnote 17	Directors		Humana Inc	17
		1					Occupational Health Centers of				Board of			
00119	Humana Inc.	00000	51-0376661				DE, P.A.	DE_	NIA	See Footnote 17	Directors		Humana Inc.	17
							Occupational Health Centers of				Board of			
00119	Humana Inc	00000	58-2285009				GA, P.C	GA	NIA	See Footnote 17	Directors		Humana Inc	17
							Occ Health Centers of LA, A				Board of			
00119	Humana Inc	00000	74-2891603				Prof. Corp.	LA	NIA	See Footnote 17	Directors		Humana Inc	17
							Occupational Health Centers of				Board of			1 1
00119	Humana Inc.	00000	38 - 2857561				MI, P.C	MI	NIA	See Footnote 17	Directors		Humana Inc	17

			PARI				URANCE HULL							
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						Name of					Type of Control			
						Securities					(Ownership,			
						Exchange if					Board,	If Control is	Ultimate	
		NAIC	Federal			Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group		Company	ID	Federal		Traded (U.S. or	Parent Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
	'					,	Occupational Health Centers of		,		Board of		` ′	
00119	Humana Inc.	00000	47 - 0827928				NE. P.C.	NE	NIA	See Footnote 17	Directors		Humana Inc	17
	İ						Occupational Health Centers of				Board of			
00119	Humana Inc.	00000	22-3473542				NJ, P.A.	NJ	NIA	See Footnote 17	Directors		Humana Inc	17
İ	İ						Occupational Health Centers of				Board of			
00119	Humana Inc.	00000	20-3187863				NY, P.A.	TX	NIA	See Footnote 17	Directors		Humana Inc.	17
							Occupational Health Centers of				Board of			
00119	Humana Inc.	00000	26-2484838				NC, P.C.	NC	NIA.	See Footnote 17	Directors		Humana Inc.	17
							Occ Health Centers of OH, P.A.,				Board of			
00119	Humana Inc.	00000	26-3239286				Co.	OH	NIA	See Footnote 17	Directors		Humana Inc	17
							Occ Health Centers of the				Board of			
00119	Humana Inc.	00000	86-0750222				Southwest, P.A	AZ	NIA	See Footnote 17	Directors		Humana Inc.	17
		1					Occ Health Centers of the				Board of			
00119	Humana Inc.	00000	75-2014828				Southwest. P.A	TX	NIA	See Footnote 17	Directors		Humana Inc.	17
		1									Board of			
00119	Humana Inc.	00000	74-2731442				OHC of Hawaii, Inc	н	NIA	See Footnote 17	Directors		Humana Inc.	17
00119	Humana Inc.	00000	04-3353031				OHR/Baystate, LLC	MA	NIA	See Footnote 15	Joint Venture		Humana Inc	15
00110	Trainaria Trio	1	01 0000001				OHR/MMC, Limited Liability			000 1 00111010 10	l vointe vointeiro		Tramaria Trio	
00119	Humana Inc.	00000	04-3353031				Company	ME	NI A	See Footnote 16.	Joint Venture		Humana Inc.	16
00110	Traillaria 1110.	1					l company			Concentra Operating			1	
00119	Humana Inc.	00000	98-0445802				OMP Insurance Company, Ltd		NIA	Corporation	Ownership	100.0	Humana Inc.	
00110	Traillaria 1110.	100000					Triburarios company, Eta.			001 por at 1011	Board of			
00119	Humana Inc	00000	20-0513177				OnSite OccMed, P.A	TX	NIA	See Footnote 17	Directors		Humana Inc	17
00110	Trailiana The	100000					Therapy Centers of South			1	Board of		Tidiliana 1110	
00119	Humana Inc.	00000	20-2883662				Carolina, P.A	SC	NIA	See Footnote 17	Directors		Humana Inc.	17
00110	I I I I I I I I I I I I I I I I I I I	100000					Therapy Centers of the	00		1	Board of		Tridiliaria Trio	
00119	Humana Inc.	00000	20-3033507				Southwest I, P.A.	TX	NIA	See Footnote 17	Directors		Humana Inc.	17
00113	1	100000					1	/ //		1	Board of		Tridiliana 1110	
00119	Humana Inc.	00000	26-4101338				U.S. MedGroup of Arkansas, P.A.	AR	NIA	See Footnote 17	Directors		Humana Inc.	17
00113	1	100000					Total moderoup of Arkansas, F.A.			1	Board of		Tridiliaria Trio	
00119	Humana Inc	00000	22-3867212				U.S. MedGroup of Delaware, P.A.	DE	NIA	See Footnote 17	Directors		Humana Inc.	17
00119		100000	. 22-3007212				U.S. MedGroup of Massachusetts,	UL	IN I M	100   100   100   17   17   17   17	Board of		Tiulilaria Tilo	17
00119	Humana Inc.	00000	20-3760561				D C	MA	NIA	See Footnote 17	Directors		Humana Inc.	17
00113	Triuliana 1116	1 00000	20-31 0000 1								Board of			
00119	Humana Inc.	00000	75-2972185				U.S. MedGroup of Michigan, P.C.	M I	NIA	See Footnote 17	Directors		Humana Inc.	17
00113	Triuliana 1116	100000	. 10-2012100				U.S. MedGroup of New Jersey,	m		1000   100111016   17	Board of			1/
00119	Humana Inc.	00000	22-3869772				IP A	NJ	NIA	See Footnote 17	Directors		Humana Inc.	17
00113	Triuliana 1116	100000					I .n		NI/\	1000   100111016   17	Board of			[1/
00119	Humana Inc	00000	26-3598351				U.S. MedGroup of New York, P.A.	TX	NIA	See Footnote 17	Directors		Humana Inc.	17
00118		1	. 20-00000 1				U.S. MedGroup of North	Ι Λ		000   00111016   17	Board of			['/
00119	Humana Inc	. 00000	26-2502158				Carolina, P.C	NC	NIA	See Footnote 17	Directors		Humana Inc	17
00119		1	. 20-2002 100				U.S. MedGroup of Ohio, P.A.,		N17A	000   00111016   17	Board of		Triulliana IIIC	1/
00119	Humana Inc.	00000	26-3239579				10.5. medeloup of offic, r.A.,	OH	NIA	See Footnote 17	Directors		Humana Inc.	17
00118	Triumana 1110	100000						υΠ	NTA	. 556   00111016   1/	Board of		11101110110 1116	1/
00119	Humana Inc	00000	75-2612924				U.S. MedGroup, P.A	TX	NIA	See Footnote 17	Directors		Humana Inc	17
00119	пишана ППС	1 00000	. 10-2012924				10.3. WEGGTOUP, P.A	I A		SEE FOOTHOLE IT	Doord of		Trumana mc	1/
00119	Humana Ino	. 00000	75-2645352				II & ModCroup D A	AZ	NIA	Soc Footpote 17	Board of Directors		Humana Inc	1-7
00119	Humana Inc	1 00000	. 10-2040002				U.S. MedGroup, P.A	AZ		See Footnote 17 Concentra Health Services.	יים ווען פונטואווען		Trumana mc	1/
00110	Humana Ina	00000	12 2464527				Occupational Health +	DE	NII A		Ownership	100.0	Illumana Ina	
00119	Humana Inc.	1 00000	13-3464527				Rehabilitation LLC	DE	NIA	Inc	.Ownership	1	Humana Inc	

1	2	3	1 71	5	6	7	UNANUL HULL	9	10	11	12	13	14	15
'	2		4	3	o o	Name of Securities	o o	9	10	"	Type of Control (Ownership,			
		NIAIG	Fadanal			Exchange if	Name of		Dalatianakia ta		Board,	If Control is	Ultimate	
Group		NAIC	Federal ID	Federal		Publicly Traded (U.S. or	Name of Parent Subsidiaries	Domiciliary	Relationship to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Controlling Entity(ies)/	
Code	Group Name	Company Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	*
Code	Group Name	Code	ivuilibei	ROOD	CIK	international)	Of Affiliates	Location	Elluty	(Name of Entity/Person)	Board of	Percentage	reison(s)	+
00119	Humana Inc	00000	27 - 4757941				Concentra Health Care, P.A	TX	NIA	See Footnote 17	Directors		Humana Inc	17
00113	1101110110		. 21 -41 51 54 1				l concentra nearth care, r.A	I A		100111016 17	Board of			
00119	Humana Inc.	00000	32-0346082				Concentra Primary Care, P.A	TX	NIA	See Footnote 17	Directors		Humana Inc.	17
00110	Trainaria Trio.	1	00 10002				Concentra Primary Care of New			1 000 1 00111010 17	Board of		Tramaria Trio	
00119	Humana Inc.	00000	45-2897046				Jersey PA	NJ	NIA	See Footnote 17	Directors		Humana Inc.	17
											Board of			
00119	.Humana Inc		75-2891678				Texas MedGroup, P.A	TX	NIA	See Footnote 17	Directors		Humana Inc	
							Concentra Primary Care of				Board of			
00119	. Humana Inc	. 00000	. 45-3637057				Arizona, PA	AZ	NIA	See Footnote 17	Directors		Humana Inc	17
							Concentra Primary Care of				Board of			
00119	. Humana Inc.	. 00000	45-4041098				Illinois, P.C.	. IL	NIA	See Footnote 17	Directors		Humana Inc	. 17
00440	l., .	00000	45 4004000				Concentra Primary Care of Ohio,	011		0 5 1 1 17	Board of		l., ,	4-
00119	Humana Inc.		45-4091303				P.A., Co	OH	NIA	See Footnote 17	Directors	400.0	Humana Inc	. 1/
00119	. Humana Inc	. 00000	. 00-5893028				Humana Europe, Ltd	GB	NIA	Humana Inc	Ownership	100.0	Humana Inc	
00119		00000	26-3583438				HUM-Holdings International,	КҮ	NIA	Humana Inc	Ownership	100.0	Humana Inc	
00119		. 1 00000	. 20-3303430					N1	INTA	HUM-Holding International,	Ownership	100.0	Tulliana mic	
00119	Humana Inc.	00000	26-3592783				HUM INT. LLC	DE	NIA	Inc.	Ownership	100.0	Humana Inc.	17
00113	Tidiliana inc.						TION TIVE, ELO			1110	Owner arrip	100.0	Tidiliana Tito	
		-												
		1	1		1			1	I			1	l	1

Asterisk	
	American Tax Credit Corporate Georgia Fund III, L.L.C., a Delaware limited liability company, was formed on October 4, 2004 for the purpose of investing in apartment complexes generating Georgia state low income housing tax credits. Humana Insurance
	Company is a Member with a 58.1736% ownership interest. The Savannah Bank, N.A. is a Member with a 1.6029% ownership interest, GMAC Insurance Georgia, L.L.C. is a Member with a 40.2133% ownership interest and Paramount Properties, Inc. is the Managing
1	Member with 0.01% ownership interest
	Availity, L.L.C., a Delaware limited liability company, was formed by affiliates of Humana Inc. and Blue Cross and Blue Shield of Florida, Inc. to develop and operate an Internet site on the World Wide Web to permit health plans to communicate and
	engage in electronic transactions with health care service providers initially in the State of Florida. HUM-e-FL, Inc., a subsidiary of Humana Inc., is a Member with a 22.5% ownership interest. Navigy, Inc., a subsidiary of Blue Cross and Blue Shield
2	of Florida, Inc., is a Member with a 33.75% ownership interest, Health Care Service Corporation, a Member, has a 33.75% ownership interest, and Sellcore, Inc., a subsidiary of WellPoint and a Member, has a 10% ownership interest
	Green Ribbon Health, L.L.C., a Delaware limited liability company, was formed on December 14, 2004 to enter into a joint venture with Humana Innovation Enterprises, Inc. and Pfizer Health Solutions, Inc. to implement the Centers for Medicare and
3	Medicaid Disease Management Program. Humana Innovation Enterprises, Inc., a subsidiary of Humana Inc., is a Member with a 50% ownership interest and Pfizer Health Solutions, Inc., a subsidiary of Pfizer, Inc. is a Member with a 50% ownership interest
	Healthcare E-Commerce Initiative, Inc., a Puerto Rico non-profit corporation, formed for the purposeof promoting an electronic bill processing and other e-commerce transactions to the providers of health care services in Puerto Rico. This is a joint
	venture with 5 members including Cooperativa de Seguros de Vida de Puerto Rico, Inc., La Cruz Azul de Puerto Rico, Inc., Medical Card System, Inc., MMM Healthcare, Inc. and Humana Insurance of Puerto Rico, Inc. jointly with Humana Health Plans of Puerto
4	Rico Inc. Each of the 5 members has an equal vote

Asterisk	Explanation
	Independent Care Health Plan, a Wisconsin corporation licensed as an HMO, operates an integrated, coordinated medical and social service managed care program for chronically disabled Medicaid recipients in Milwaukee, Wisconsin. CareNetwork, Inc. owns
5	50% of the company's stock. New Health Services, Inc. owns the other 50%.
	Sensei, Inc., a Delaware corporation, was incorporated on August 24, 2005 to enter into a joint venture with Humana Innovation Enterprises, Inc. and Card Guard AG, a Swiss corporation, dedicated to defining, building, and distributing the next
	generation of wireless health platforms. On December 12, 2008, Humana Innovation Enterprises, Inc. purchased all of Sensei, Inc.'s shares from Card Guard AG whereby Humana Innovation Enterprises, Inc. owned 100% of Sensei's issued and outstanding
6	stock. On May 17, 2010, Robert Schwarzberg purchased 81% of Sensei's shares from Humana Innovation Enterprises, Inc., leaving the company with a 19% ownership interest
	HumanaVitality, LLC, a Delaware limited liability company, was formed on January 3, 2011, and The Vitality Group, LLC, a Delaware limited liability company, was formed on February 15, 2011 through affiliates of Humana Inc. and Discovery Holdings
	Limited, a South African company, to offer Discovery's Vitality wellness and loyalty program to Humana members. Humana WellWorks LLC, a subsidiary of Humana Inc., owns 75% of HumanaVitality, LLC and 25% of The Vitality Group, LLC. The Vitality Group,
7	Inc., a subsidiary of Discovery Holdings Limited, owns 25% of HumanaVitality, LLC and 75% of The Vitality Group, LLC.
8	CM Occupational Health, Limited Liability Company is a Maine limited liability company. Occupational Health + Rehabilitation LLC has a 90% ownership interest and Advanced Health Services, Inc. has a 10% ownership interest
9	Concentra Akron, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Akron General Partners, Inc. has a 49% ownership interest
10	Concentra Arkansas, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and St. Vincent Community Health Services, Inc. has a 49% ownership interest
11	. Concentra Occupational Healthcare Harrisburg, L.P. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Pinnacle Health Hospitals has a 49% interest.
12	Concentra South Carolina, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and North Trident Regional Hospital, Inc. has a 49% ownership interest
13	. Concentra St. Louis, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 70% ownership interest and Tenet HealthSystem SL-HLC, Inc. has a 30% ownership interest
	Concentra-UPMC, L.L.C. is a Delaware limited liability company. Concentra Health Services, Inc. has a 51% ownership interest and Community Occupational Medicine, Inc. has a 49% ownership interest
15	OHR/Baystate, LLC is a Massachusetts limited liability company. Occupational Health + Rehabilitation LLC has a 51% ownership interest and Bayside Medical Center has a 49% ownership interest
16	OHR/MMC, Limited Liability Company is a Main limited liability company. Occupational Health + Rehabilitation LLC has a 51% ownership interest and Maine Health has a 49% ownership interest
17	Professional Services Relationship/Agreement with Concentra health Services, Inc.

## **SCHEDULE Y**

## PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

												13
1	2	3	4	5	6	. 7	8	9	10	11	12	
					D	Income/						D.:
					Purchases, Sales or							Reinsurance
					Exchanges of Loans, Securities,	Incurred in Connection with		Income/		Any Other Material		Recoverable/ (Payable) on
					Real	Guarantees or		(Disbursements)		Activity Not in the		Losses and/or
NAIC					Estate, Mortgage	Undertakings for the	Management	Incurred Under		Ordinary Course of		Reserve
Company	Federal ID		Shareholder	Capital	Loans or Other	Benefit of any	Agreements and	Reinsurance		the Insurer's		Credit
Code	Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Dividends	Contributions	Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
88595		Emphesys Insurance Company	Bividende	Contributions	invocancino	7 ((1))	(69,658)	rigicomonio		Business	(69,658)	raker#(Elability)
00000	61-0647538	Humana Inc	(1,072,500,000)	211.500.000			2,029,928,114		1		1,168,928,114	
73288	39-1263473	Humana Insurance Company	475.000.000				(842,544,023)		1		(367,544,023)	
00000	26-3473328	Humana Health Plan of California.					(8, 137, 276)		I		(8,137,276)	
65110	57 - 0380426	Kanawha Insurance Co					(66,780,630)		l		(66,780,630)	
60052	37 - 1326199	Humana Benefit Plan of Illinois	25,000,000				(19,361,580)		l		5.638.420	
10126	65-1137990	Humana AdvantageCare Plan	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(17,028,142)		l		(17,028,142)	
54739	52-1157181	The Dental Concern, Inc.	1,000,000				(4.419.694)		1		(3,419,694)	
70580	39-0714280	HumanaDental Insurance Company	18,000,000				(18,594,044)		1		(594,044)	
52028	39-3654697	The Dental Concern, Ltd					(107,410)		1		(107,410)	
95348	31-1154200	Humana Health Plan of Ohio, Inc					(13.357.055)		l		(13,357,055)	
95342	39 - 1525003	Humana WI Health Org. Insurance Corp.					(19,577,800)		<u> </u>		(19,577,800)	
00000	27 - 3991410	Humana Medical Plan of Michigan, Inc.		(5,000,000)					<u> </u>		(5,000,000)	
95519	158-2209549 I	IHumana Employers Health Plan of GA Inc					(45, 262, 673)		ļ		(45, 262, 673)	
95270	61-1103898	Humana Medical Plan. Inc.	276,000,000				(674,328,979)		ļ		(398,328,979)	
69671	61 - 1041514	Humana Health Insurance Co FL, Inc.	36,000,000				148,704,216		ļ		184 , 704 , 216	
95754	62-1579044	Cariten Health Plan					(76, 336, 509)		ļ	ļ	(76, 336, 509)	
95885	61-1013183	Humana Health Plan, Inc	30,000,000				(378,636,153)		ļ		(348,636,153)	
60219	61-1311605	Humana Insurance Company of Kentucky					(2,541,089)		ļ	<u> </u>	(2,541,089)	
95024	61-0994632	Humana Health Plan of Texas, Inc					(55,965,128)		ļ	ļ	(55,965,128)	
00000	66-0406896	Humana Health Plans of Puerto Rico, Inc.					9,605,031		ļ		9,605,031	
00000	66-0291866	Humana Insurance of Puerto Rico, Inc					(13,942,397)		ļ		(13,942,397)	
00000	61-1232669	Managed Care Indemnity, Inc.	50,000,000				843,663		ļ		50,843,663	
95642	72-1279235	Humana Health Benefit Plan of LA, Inc	50 , 000 , 000				(162,320,272)		ļ		(112,320,272)	
95092	59-2598550	CarePlus Health Plans, Inc	50,000,000				(67,713,678)		ļ		(17,713,678)	
00000		CAC-Florida Medical Centers, LLC					7,837,993		ļ		7 ,837 ,993	
12634	20 - 2888723	Humana Insurance Company of New York	17,000,000				(23,271,203)		ļ	ļ	(6,271,203)	
82740	62-0729865	Cariten Insurance Company.	15,000,000				(3,451,049)		ļ		11,548,951	
00000	20-1981339	MD Care, Inc.		(25,000,000)			(23,080)		ļ	ļ	(25,023,080)	
00000	61-1343508	Humana Marketpoint, Inc.			ļ		407, 163, 357		ļ	ļ	407 , 163 , 357	
00000	61-1316926	Humana Pharmacy, Inc.			ļ		(8,504,539)		ļ	ļ	(8,504,539)	
00000		Humco, Inc					15		ļ	ļ	15	
00000		HUM-e-FL, Inc					(789,760)		ļ		(789,760)	
00000	75-2043865	Corphealth, Inc.					(4,592,289)		ļ		(4,592,289)	
95158	61-1279717	CHA HMO					(423 , 135)		<b></b>	ļ	(423 , 135)	
00000	33-0916248	DefenseWeb Technologies, Inc.					(31,995,559)		ļ	ļ	(31, 995, 559)	
00000	00-5893028	Humana Europe, Ltd.		(4 500 000)	ļ		(557, 117)		<del> </del>	<del> </del>	(557 , 117)	
12908	20-8411422	Humana Medical Plan of Utah.		(1,500,000)	ļ		(4,033,456)		<del> </del>	<del> </del>	(5,533,456)	
00000	59-1843760	Humana/CompBenefits, Inc			ł		32,285,498		<del> </del>	ł	32,285,498	
95107		American Dental Plan of NC	-		ł		(348,300)		<del> </del>	<del> </del>	(348,300)	
11559		American Dental Providers of AR.	7 500 000		····		(69,078)		ł	·····	(69,078)	
52015	59-2531815	CompBenefits Company	7,500,000		1		(34, 266, 128)		L	Ll	(26,766,128)	

## **SCHEDULE Y**

## PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

												13
1	2	3	4	5	6	7	8	9	10	11	12	
						Income/						D
					Purchases, Sales or Exchanges of	(Disbursements) Incurred in						Reinsurance Recoverable/
					Loans, Securities,	Connection with		Income/		Any Other Material		(Payable) on
					Real	Guarantees or		(Disbursements)		Activity Not in the		Losses and/or
NAIC					Estate, Mortgage	Undertakings for the	Management	Incurred Under		Ordinary Course of		Reserve
Company	Federal ID		Shareholder	Capital	Loans or Other	Benefit of any	Agreements and	Reinsurance		the Insurer's		Credit
Code	Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Dividends	Contributions	Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
00000	61-1241225	Humana Military Healthcare Services, Inc.				```	67,474,688				67,474,688	```
00000	20-1717441	Humana Government Network Services, Inc.					140				140	
00000	20 -8418853	Humana Veterans Healthcare Services, Inc.					(35.714.693)				(35,714,693)	
60984	74-2552026	CompBenefits Insurance Company	15,000,000				(25,679,050)				(10,679,050)	
95161	76 - 0039628	Den'tiCare, Inc	3,000,000				(10,664,420)		ļ		(7,664,420)	
00000	36-3512545	Dental Care Plus Mangement, Corp					(5,004,974)				(5,004,974)	
11228	36-3686002	CompBenefits Dental, Inc.	1,000,000				(6,150,668)			ļļ.	(5,150,668)	
12250	63-1063101	CompBenefits of Alabama					(288,420)				(288,420)	
00000	58-2198538	CompBenefits of Georgia, Inc.					(2,357,874)				(2,357,874)	
95749	62-1546662	Preferred Health Partnership of TN, Inc	3,000,000				(233,470)				2,766,530	
00000	61-1237697	Emphesys, Inc.					30,310				30,310	
00000	26-3583438	Humana Holdings International					110,299		· · · · · · · · · · · · · · · · · · ·		110,299	
00000	26-4522426 20-1377270	Humana WellWorks LLC.		/400 000 000\						· <del> </del>	(195.716.550)	
00000	86-1050795	KMG America Corporation Hummingbird Coaching Systems, LLC		(180,000,000)			(583,379)			<del> </del>	(195,716,550)	
00000	62-1245230	Kanawha Healthcare Solutions					19,576			+	19,576	
00000	27 -4535747	HumanaVitality, LLC					(5,077,995)			·	(5,077,995)	
00000	45 - 2254346	Humana Pharmacy Solutions, Inc.					1,007,508				1,007,508	
00000	62-1552091	PHP Companies Incorporated.					3,073,116				3,073,116	
00000	45-3116348	HomeCare Health Solutions, Inc.					1,224		· · · · · · · · · · · · · · · · · · ·		1,224	
00000	42-1575099	Competitive Health Analytics, Inc.									532,780	
00000	77 -0540040	Anvita, Inc.					(597,425)				(597,425)	
00000	26-4823524	Concentra Inc.					(611,615)				(611,615)	
00000	71-0732385	Humana Health Plan Interests, Inc.					3,691				3,691	
00000	30-0117876	JCPHP Holdinas. Inc.					(4)				(4)	
00000	27 - 1323221	Humana Military Dental Services, Inc					125				125 <sup>′</sup>	
00000	20-3364857	Humana MarketPOINT of Puerto Rico, Inc.					100				100	
00000	39-1514846	CareNetwork, Inc.					(876,789)		ļ		(876,789)	
00000	61-1223418	JHealth Value Management. Inc.					(4,555,684)				(4,555,684)	
00000	61-1364005	HumanaDental, Inc					(1,854)			ļ	(1,854)	
00000	61-1343791	Humana Innovation Enterprises, Inc.					82,936				82,936 <sup>′</sup>	
00000	20-1724127	Preservation on Main Inc.					4,401,335			ļ	4,401,335	
00000	61-1279716	CHA Service Company					30,310				30,310	
00000	20-4835394	Humana Active Outlook, Inc.					45,801			ļ	45,801	
00000	20-5309363 04-3185995	West Main Street Condominium Council Inc.					15			·	15	
00000	58-2228851	CompBenefits Corporation					(2,179)			·	(2,179) 410,524	
00000	74-2352809	Texas Dental Plans, Inc.			<del> </del>		2,023			+	2,023	
00000	20-2620891	Green Ribbon Health, LLC					3,854			†	3,854	
00000		Preferred Health Partnership, Inc.					(177,067)			†	(177 .067)	
00000		HumanaCares, Inc.					44,501			T	44.501	

# **SCHEDULE Y**

## PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Incurred in Connection with Guarantees or Undertakings for the Benefit of any	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements		Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

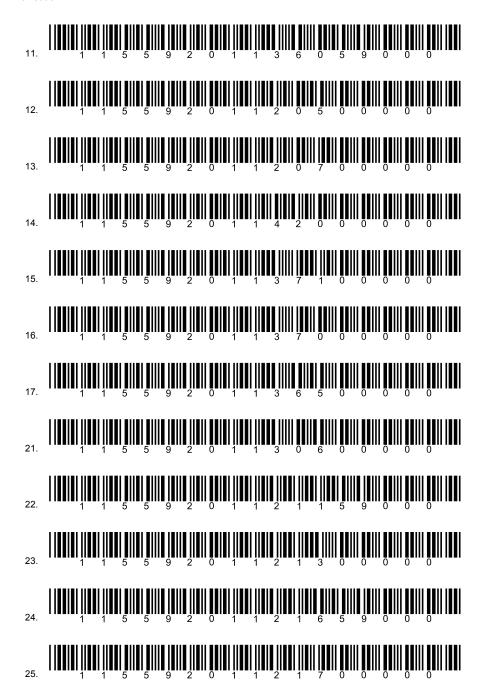
	MARCH FILING	Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	·	YES
3.		YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
	APRIL FILING	
5.	, , , , ,	YES
6.		YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
	JUNE FILING	
8.		YES
9.	•	YES.
40	AUGUST FILING	YES
10.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	1E5
which	ollowing supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the special report must be filed, your response of <b>NO</b> to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar cod pplement is required of your company but is not being filed for whatever reason enter <b>SEE EXPLANATION</b> and provide an explanation following ons.	e will be printed below. If
	MARCH FILING	
11.		N0
12.		NO
13.		NO
14.		N0
15.	be filed with the state of domicile and electronically with the NAIC by March 1?	N0
16.		N0
17.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	N0
18.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	SEE EXPLANATION
19.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	SEE EXPLANATION
20.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1?	SEE EXPLANATION
	APRIL FILING	
21.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	N0
22.	Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
23.	Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	NO
24.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
25.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	N0
	AUGUST FILING	
26.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
Funda		
·	nation:	
11. 11	nis type of business is not written.	
12. TI	nis type of business is not written.	
13. TI	nis type of business is not written.	
14. TI	nis type of business is not written.	
15. TI	nis type of business is not written.	
16. TI	nis type of business is not written.	
17. TI	nis type of business is not written.	
18. No	o relief will be requested.	
19. No	o relief will be requested.	

20. No relief will be requested.

### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 21. This type of business is not written
- 22. This type of business is not written.
- 23. This type of business is not written.
- 24. This type of business is not written
- 25. This type of business is not written

#### Bar code:



### **OVERFLOW PAGE FOR WRITE-INS**

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